# Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 1 of 61

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself				
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name				
your gove picture ide example,	Write the name that is on your government-issued picture identification (for example, your driver's	Steven First name D		<b>Dorothy</b> First name	
	license or passport).	Middle name		Middle name	
	Bring your picture identification to your meeting with the trustee.	Conner Last name and Suffix (Sr., Jr., II, III)		Conner  Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years Include your married or maiden names.			FKA Dorothy Ivory	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9960		xxx-xx-0555	

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 2 of 61

Debtor 1 Steven D Conner Debtor 2 Dorothy Conner

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	■ I have not used any business name or EINs.  Business name(s)  EINs		
Where you live	500 Di L I D	If Debtor 2 lives at a different address:		
	Volo, IL 60073  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
	Lake County	County		
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other		
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names  Where you live  Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names  Business name(s)  EINs  Where you live  508 Richard Brown Volo, IL 60073  Number, Street, City, State & ZIP Code  Lake  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code  Why you are choosing this district to file for bankruptcy  Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason.		

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 3 of 61

Den	tor 2 Dorothy Conner			•	Case number (if known)		
Par	Tell the Court About	Your Bankruptcy (	Case				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	Chapter 7					
		☐ Chapter 11					
		☐ Chapter 12					
		☐ Chapter 13					
8.	How you will pay the fee	■ I will pay th	ne entire fee when	I file my petition. Please check	with the clerk's office in your local court for me	ore details	
	, ,,	about how y	you may pay. Typica ur attorney is submit	ally, if you are paying the fee you	urself, you may pay with cash, cashier's check, If, your attorney may pay with a credit card or o	or money	
		☐ I need to p	ay the fee in instal		n, sign and attach the Application for Individua	ls to Pay	
		•	`	Official Form 103A).	only if you are filing for Chapter 7. By law, a ju	ıdae may	
		but is not re applies to y	equired to, waive your family size and	ur fee, and may do so only if you you are unable to pay the fee in	in income is less than 150% of the official pove installments). If you choose this option, you mal Form 103B) and file it with your petition.	rty line that	
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
	last o years:	Distric	t	When	Case number		
		Distric		When	0		
		Distric		When	Case number		
10	Are any bankruptcy	_					
10.	cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
		Debtor	r		Relationship to you		
		Distric	t	When	Case number, if known		
		Debtor	r		Relationship to you		
		Distric	t	When	Case number, if known		
11.	Do you rent your	■ No. Go to	line 12.				
	residence?		your landlord obtain	ed an eviction judgment against	you and do you want to stay in your residence	?	
			No. Go to line 12				
			Yes. Fill out <i>Initia</i> bankruptcy petition		udgment Against You (Form 101A) and file it w	vith this	

Debtor 1

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Debtor 1 Steven D Conner Page 4 of 61

Deb	otor 2 <b>Dorothy Conner</b>				Case number (if known)	
Par	Report About Any Bu	sinesses	You Own	ı as a Sole Proprie	etor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	e and location of bus	siness	
	A sole proprietorship is a					
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any		
	If you have more than one sole proprietorship, use a		Numb	per, Street, City, Star	ate & ZIP Code	
	separate sheet and attach it to this petition.		Chec	k the appropriate bo	ox to describe your business:	
				Health Care Busin	iness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	al Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))	
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
				None of the above	/e	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	ou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriations. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement rations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedul. U.S.C. 1116(1)(B).			
	For a definition of small	■ No.	I am r	not filing under Chap	pter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		r 11, but I am NOT a small business debtor according to the definition in the Bankrupto	У
		☐ Yes.	I am f	iling under Chapter	r 11 and I am a small business debtor according to the definition in the Bankruptcy Cod	le.
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	ny Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to public health or safety?	□ 1es.	What is	the hazard?		
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?		
					Number, Street, City, State & Zip Code	

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 5 of 61

Debtor 1	Steven D Conner	3		
Debtor 2	Dorothy Conner		Case number (if known)	

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 6 of 61

	tor 1 tor 2	Steven D Conner Dorothy Conner		Document	r age o o	_	umber <i>(if kr</i>	nown)	
Part	6:	Answer These Questi	ons for Repo	orting Purposes				· ·	
		t kind of debts do			ner debts? Cons	sumer debts are	defined in	n 11 U.S.C. § 101(8) as "incurred by an	
		have?	ind	individual primarily for a personal, family, or household purpose."					
				No. Go to line 16b.					
				Yes. Go to line 17.					
				<b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
				No. Go to line 16c.					
				Yes. Go to line 17.					
			16c. St	ate the type of debts you owe that	at are not consur	mer debts or bu	siness deb	ots	
17.		ou filing under oter 7?	□ No. I a	nm not filing under Chapter 7. Go	to line 18.				
after		ou estimate that any exempt erty is excluded and		nm filing under Chapter 7. Do you e paid that funds will be available				s excluded and administrative expenses	
	admi	nistrative expenses		No					
	are paid that funds will be available for distribution to unsecured creditors?		Yes						
18.		many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000			<b>1</b> 25,001-50,000	
		you estimate that you owe?	□ 50-99		☐ 5001-10,000			☐ 50,001-100,000	
			☐ 100-199 ☐ 200-999		10,001-25,0	00		☐ More than100,000	
19.		much do you	<b>\$0 - \$50,</b>	000	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million			□ \$500,000,001 - \$1 billion	
		nate your assets to orth?	□ \$50,001 -	- \$100,000				□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
			□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million		n	☐ More than \$50 billion	
20.		much do you	<b>\$0 - \$50,</b>	000	□ \$1,000,001 - \$10 million			□ \$500,000,001 - \$1 billion	
	to be	nate your liabilities ??	\$50,001		□ \$10,000,001			□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
			☐ \$100,001 - \$500,000 ☐ \$500,001 - \$1 million		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million		n	☐ More than \$50 billion	
Part	t <b>7</b> :	Sign Below							
For	you		I have exam	ined this petition, and I declare u	nder penalty of p	perjury that the i	informatio	n provided is true and correct.	
				sen to file under Chapter 7, I am s Code. I understand the relief a				er Chapter 7, 11,12, or 13 of title 11, eto proceed under Chapter 7.	
				y represents me and I did not pay have obtained and read the notic				attorney to help me fill out this	
			I request reli	ef in accordance with the chapte	r of title 11, Unite	ed States Code	, specified	in this petition.	
								perty by fraud in connection with a , or both. 18 U.S.C. §§ 152, 1341, 1519,	
			/s/ Steven			/s/ Dorothy			
			Steven D ( Signature of			Dorothy Co Signature of D			
			Executed on	November 30, 2016		Executed on	Novem MM / DD	ber 30, 2016	

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 7 of 61

Steven D Conner Dorothy Conner	Document	Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joseph	R. Doyle	Date	November 30, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Joseph R.	Doyle		
Printed name			
Bizar & Do	oyle, LLC		
Firm name			
123 West I	Madison Street		
Suite 205			
Chicago, I	L 60602		
	City, State & ZIP Code		
Contact phone	312-427-3100	Email address	joe@bizardoylelaw.com
6279065			
Bar number & S	tate		<del></del>

Debt		6 PM -37825	Doc 1 Filed 11/30/1	Page 8 of 61	00:34 Desc Main
Debt				Case number (	(If known)
Part					1( 44110 0 0 444(0)   11
	What kind of debts do you have?		Are your debts primarily consume individual primarily for a personal, f		d in 11 U.S.C. § 101(8) as "incurred by arr
		1	☐ No. Go to line 16b.		
			Yes. Go to line 17,		
				es debts? Business debts are debts that or through the operation of the busine	
			☐ No. Go to line 16c.		
			Yes. Go to line 17.		
		16c.	State the type of debts you owe the	at are not consumer debts or business	debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.	
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available	u estimate that after any exempt proper e to distribute to unsecured creditors?	rty is excluded and administrative expenses
	administrative expenses		□No		
	are paid that funds will be available for distribution to unsecured creditors?		■ Yes		
18.	you estimate that you	■ 1-49 □ 50-99		☐ 1,000-5,000 ☐ 5001-10,000	☐ 25,001-50,000 ☐ 50,001-100,000
	owe?	☐ 100-19 ☐ 200-99	= = .	10,001-25,000	☐ More than100,000
19.	How much do you estimate your assets to	■ \$0 - \$50,000 □ \$50,001 - \$100,000		☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion
	be worth?	\$100,0	01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.	How much do you estimate your liabilities	\$0 - \$5	-	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion
	to be?	<b>□</b> \$100,0	001 - \$100,000 001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
Par	t 7: Sign Below				
For	you	I have ex	amined this petition, and I declare	under penalty of perjury that the inform	ation provided is true and correct.
		If I have o United St	chosen to file under Chapter 7, I an tates Code. I understand the relief	n aware that I may proceed, if eligible, available under each chapter, and I cha	under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.
				ay or agree to pay someone who is not lice required by 11 U.S.C. § 342(b).	an attorney to help me fill out this
		l request	relief in accordance with the chapt	ter of title 11, United States Code, spec	sifled in this petition.
		I understa bankrupte and 357	to case can result in fines up to \$2	250,000, or imprisonment for up to 20 years	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
			D Conner e of Debtor 1	Dorothy Conner Signature of Deblor	
	en e	Executed	MM / DD / YYYY		vember 10, 2016 / DD / YYYY

Nov. 17. 2016 Case obtor 1 Steven D Conner obtor 2 Dorothy Conner	16-37825 Doc 1	Filed 11/30/16 Document	Page 9 of 61	0/16 14:00:34 Desc Main
r your attorney, if you are presented by one you are not represented by attorney, you do not need file this page.	for which the person is eli	or 13 of title 11, United Sta gible. I also certify that H 707(b)(4)(D) applies, certi	ates Code, and have e have delivered to the c	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b) ledge after an inquiry that the Information in the
ine tina page.	Signature of Attorney for I	Debtor	Date	November 10, 2016 MM / DD / YYYY
	Joseph R. Doyle	<u> </u>		
	Bizar & Doylé, LLC	-		
	123 West Madison St Suite 205 Chicago, IL 60602			
	Number, Street, City, State & ZIP  Contact phone 312-427-3	,	Email address	joe@bizardoylelaw.com
	6270065			

Nov. 17. 2016 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Page 10 of 61

ill in this infort	mation to identify your	case:		•	
ebtor 1	Steven D Conner	,	Last Name		
	First Name	Middle Name	LEST (1477)		
ebtor 2 pouse il, filing)	Dorothy Conner First Name	Middle Name	Last Name		
nited States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS	· .	
ase number _		<u> </u>	· · · · · · · · · · · · · · · · · · ·		Check if this is an amended filling
fficial For	m 106Dec			Labor	
)oclara	tion About	an Individue	al Debtor's Sch	edul <u>es                                    </u>	12/15
si	ign Below				
		meone who is NOT an a	ttorney to help you fill out ban	nkruptcy forms?	
■ No					
— □ Yes	. Name of person			Attach Bankruptcy F Declaration, and Sig	Petition Preparer's Notice, Inature (Official Form 119
11 A u <b>n</b> o	and the street of the street of the street	are that I have read the s	summary and schedules filed	with this declaration and	
that they	ate true and correct.		( ) and	$\Lambda$	
XStev	ven D Conner ature of Debtor 1		Dorothy Cor	nner	:
200111	ATUTA OF DEDICE 1		Signature of D	Jentol Z	

Nov. 1 Debtor 1 Debtor 2	Case 16-37825 Steven D Conner Dorothy Conner		d 11/30/16 ocument	Entered 11/30/16 14:00:34 Page 11 of 61  Case number (I known)	1524 P 14/34 Desc Main
-	Sign Below				
with a ban 18 U.S.C. §	ia correct. I understand that	making a false sta nes up to \$250,000	itement, concesso, of imprisonme		perjury that the answers erty by fraud in connection
Date No	ovember 10, 2016		Dale Nove	mber 10, 2016	
Did you at ■ No □ Yes	tach additional pages to <i>Yo</i> o	ur Statement of Fir	ancial Affairs f	or Individuals Filing for Bankruptcy (Officia	al Form 107)?
Did you pa ■ No	ay or agree to pay someone	who is not an atto	rney to help you	fill out bankruptcy forms?	
☐ Yes, Na	me of Person Attach	the <i>Bankruptcy Peti</i>	tion Preparer's N	otice, Declaration, and Signature (Official For	m 119),

Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main 13/34 Page 12 of 61 Document Debtor 1 Steven D Conner Case number (If known) **Dorothy Conner** Debtor 2 ☐ Yes ☐ Retain the property and redeem it. name: ☐ Retain the property and enter into a Description of Reaffirmation Agreement. ☐ Retain the property and [explain]: property securing debt: Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the Information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired persons property leases with a secure of the sec □ No Lessor's name: Description of leased ☐ Yes Property: ☐ No Lessor's name: Description of leased ☐ Yes Property: □ No Lessor's name: Description of leased ☐ Yes Property: ☐ No Lessor's name: Description of leased Property: ☐ Yes □ No Lessor's name: Description of leased Property: ☐ Yes ☐ No Lessor's name: Description of leased aeY 🗆 Property: □ No Lessor's name: Description of leased Property: ☐ Yes Part 3: Sign Below of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal Under penalty property that is subject to an unexpired lease. X X Dorothy Conner Steven D Conner Signature of Debtor 2 Signature of Debtor 1

Statement of Intention for Individuals Filing Under Chapter 7

Date

November 10, 2016

Date

November 10, 2016

		DOCUME	ni Page 13 0101		
Fill in this infor	mation to identify your	case:			
Debtor 1	Steven D Conner				
	First Name	Middle Name	Last Name		
Debtor 2	<b>Dorothy Conner</b>				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				"	Check if this is an amended filing

## Official Form 106Sum

## **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

•			
Par	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	8,648.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	8,648.00
Par	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	44,982.00
	Your total liabilities	\$	44,982.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,563.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,580.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

		Document	Page 14 of 61	
	Steven D Conner		9	
Debtor 2	Dorothy Conner		Case number (if known)	

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,607.17

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	39.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	39.00

	Case 16-37825 Do	c 1 Filed 11/30/16 Document	Entered 11/30/ Page 15 of 61	16 14:00:34	Desc Main
Fill in this inf	ormation to identify your cas		Paue 13 01 01		
Debtor 1	Steven D Conner				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	Dorothy Conner First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the: NC	RTHERN DISTRICT OF ILLI	NOIS		
Case number			_		☐ Check if this is an
					amended filing
~ <i></i>					
_	orm 106A/B				
<u>Schedu</u>	ule A/B: Proper	ty			12/15
hink it fits best nformation. If n answer every q	y, separately list and describe ite . Be as complete and accurate at nore space is needed, attach a se uestion. be Each Residence, Building, La	s possible. If two married peopl parate sheet to this form. On th	e are filing together, both a le top of any additional page	re equally responsible fo	or supplying correct
. Do you own	or have any legal or equitable into	erest in any residence, building	, land, or similar property?		
■ No. Go to	Dort 2				
_	re is the property?				
Tes. Whe	re to the property:				
Part 2: Descri	be Your Vehicles				
B. Cars, vans,  □ No ■ Yes	, trucks, tractors, sport utility	vehicles, motorcycles			
3.1 Make:	Ford	Who has an interest in th	e nronerty? Check one	Do not deduct secure	ed claims or exemptions. Put
Model:	Excursion	Debtor 1 only	e proporty: onlock one		cured claims on Schedule D: Claims Secured by Property.
	2000	Debtor 2 only		Current value of the	
Year:	0.40.000	<b>= B 1</b> ( 1 <b>B 1</b> ( 2	only		Current value of the
	mate mileage: <b>240,000</b>	■ Debtor 1 and Debtor 2	Offig	entire property?	portion you own?
Approxir Other in	formation:	At least one of the debt	•	entire property?	portion you own?
Approxir Other in		_ Debior 1 and Debior 2	ors and another	entire property? \$2,475.0	

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Do	btor 1	Case 16-3 Steven D Co		Doc 1	Filed 11/30/16 Document	Entered 11/30/16 14 Page 16 of 61	4:00:34	Desc Main
	btor 1 btor 2	Dorothy Con				Case numl	ber (if known)	
	Example □ No	old goods and fo es: Major applian Describe	ces, furnitu	ure, linens, ch				
			Miscella	aneous use	d household goods			\$2,000.00
	□No	es: Televisions ar	phones, ca		a players, games	ment; computers, printers, scani	ners; music c	collections; electronic devices
	Example □ No	oles of value es: Antiques and other collection				oks, pictures, or other art objects	; stamp, coin,	, or baseball card collections;
			Miscella	aneous boo	oks, tapes, CD's, etc	•		\$200.00
	□ No ■ Yes.	musical instru		aneous Spo	orts Equipment			\$200.00
	■ No		s, shotguns	s, ammunition	, and related equipment			
	□ No É		othes, furs,	leather coats	s, designer wear, shoes,	accessories		
			Person	al used clot	thing			\$500.00
	□ No		welry, cost	ume jewelry, (	engagement rings, wed	ding rings, heirloom jewelry, wato	ches, gems, ç	gold, silver
			Miscella	aneous cos	tume jewelry			\$125.00
14.	Examp  ■ No □ Yes.  Any oth	rm animals bles: Dogs, cats, b Describe ner personal and			ı did not already list, iı	ncluding any health aids you d	id not list	
	No							

Official Form 106A/B Schedule A/B: Property page 2

Entered 11/30/16 14:00:34 Case 16-37825 Doc 1 Filed 11/30/16 Desc Main Page 17 of 61 Document Steven D Conner Debtor 1 Debtor 2 **Dorothy Conner** Case number (if known) ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4,025.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **Great Lakes Credit Union** \$1,503.00 17.1. Checking **Great Lakes Credit Union** \$640.00 17.2. Savings **BCU** \$5.00 Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No

Yes. List each account separately.

Type of account: Institution name:

Pension Pension through employer Unknown

401(k) through employer - 100% exempt 401(k) Unknown Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 18 of 61

		Steven D Con Dorothy Conn	ner	Case number (if known)		
			Thrift Saving	Thrift Savings Plan		Unknow
22.	Your sl Examp ☐ No		deposits you have made s	so that you may continue service or us , public utilities (electric, gas, water), t Institution name or individual:	telecommunications companies	, or others
	_ 103.		Rental deposit	Roger Humner		\$0.0
23.	Annuiti	ies (A contract for	a periodic payment of mor	ney to you, either for life or for a numb	er of years)	
	■ No □ Yes	lssu	er name and description.			
24.	Interest 26 U.S.0	s in an education C. §§ 530(b)(1), 52	<b>IRA, in an account in a</b> 9A(b), and 529(b)(1).	qualified ABLE program, or under a	a qualified state tuition progra	am.
	■ No □ Yes	Insti	tution name and description	on. Separately file the records of any i	interests.11 U.S.C. § 521(c):	
25.	■ No	·	re interests in property (	other than anything listed in line 1)	, and rights or powers exerci	sable for your benefit
26.	Patents Examp  ■ No	s, copyrights, trac les: Internet doma	lemarks, trade secrets, a	and other intellectual property leds from royalties and licensing agree	ements	
27.	Examp  ■ No	oles: Building permi	d other general intangib ts, exclusive licenses, coo mation about them	oles operative association holdings, liquor l	icenses, professional licenses	
M		property owed to				Current value of the portion you own?  Do not deduct secured
						claims or exemptions.
28.	■ No	unds owed to you				
	⊔ Yes. (	Give specific inforr	nation about them, includi	ng whether you already filed the return	ns and the tax years	
29.	■ No		, , , , , ,	support, child support, maintenance,	divorce settlement, property se	ttlement
		·				
30.	Examp			nents, disability benefits, sick pay, vac leone else	cation pay, workers' compensa	tion, Social Security
	■ No □ Yes.	Give specific infor	mation			
31.		ts in insurance po bles: Health, disabil		h savings account (HSA); credit, home	eowner's, or renter's insurance	
	_	Name the incuranc	e company of each policy	and list its value		

Beneficiary:

Company name:

Surrender or refund

value:

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 19 of 61 Steven D Conner

Debtor 2	<b>Dorothy Conner</b>		Case number (if known)			
		Employer - Term Life Insurance - no cash surrender value	Children	\$0.00		
If you some		t is due you from someone who has died a living trust, expect proceeds from a life insurance ion	e policy, or are currently entitled to rec	eive property because		
Exam ■ No		s, whether or not you have filed a lawsuit or m yment disputes, insurance claims, or rights to sue				
■ No	contingent and unliquent.	uidated claims of every nature, including cour	nterclaims of the debtor and rights to	o set off claims		
■ No	nancial assets you did	•				
		of your entries from Part 4, including any entrier here		\$2,148.00		
Part 5: De	escribe Any Business-Re	elated Property You Own or Have an Interest In. List	any real estate in Part 1.			
37. Do you	own or have any legal or	r equitable interest in any business-related property	?			
_ `	io to Part 6.					
☐ Yes. (	Go to line 38.					
		ommercial Fishing-Related Property You Own or Ha st in farmland, list it in Part 1.	ve an Interest In.			
46. <b>Do yo</b>	u own or have any leg	gal or equitable interest in any farm- or comme	ercial fishing-related property?			
■ No.	. Go to Part 7.					
☐ Yes	s. Go to line 47.					
Part 7:	Describe All Property	You Own or Have an Interest in That You Did Not Li	st Above			
Exam		of any kind you did not already list? ountry club membership				
■ No □ Yes.	. Give specific informati	on				
54. <b>Add</b>	the dollar value of all	of your entries from Part 7. Write that number	here	\$0.00		

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 20 of 61

Steven D Conner Debtor 1 Debtor 2 **Dorothy Conner** Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ...... \$0.00 56. Part 2: Total vehicles, line 5 \$2,475.00 Part 3: Total personal and household items, line 15 \$4,025.00 57. Part 4: Total financial assets, line 36 58. \$2,148.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$8,648.00 Copy personal property total \$8,648.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$8,648.00

		17/7/4/11/11	311 1188: 2 1 371 371		
Fill in this infor	mation to identify your	case:			
Debtor 1	Steven D Conner				
	First Name	Middle Name	Last Name		
Debtor 2	<b>Dorothy Conner</b>				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this is a amended filing	า

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

<ol> <li>Which set of exemptions are you claiming? Check one only, even if your spo</li> </ol>	pouse is tilir	ig with you
------------------------------------------------------------------------------------------------	----------------	-------------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2000 Ford Excursion 240,000 miles Value based on NADA	\$2,475.00		\$4,800.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Miscellaneous used household goods	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	
Miscellaneous electronics Line from Schedule A/B: 7.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
Miscellaneous books, tapes, CD's,	\$200.00		\$200.00	735 ILCS 5/12-1001(a)
Line from Schedule A/B: 8.1			100% of fair market value, up to any applicable statutory limit	
Miscellaneous Sports Equipment	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Ello IIOIII Goriodulo FAD. G.1			100% of fair market value, up to any applicable statutory limit	

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 22 of 61

**Dorothy Conner** Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Personal used clothing 735 ILCS 5/12-1001(a) \$500.00 \$500.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Miscellaneous costume jewelry 735 ILCS 5/12-1001(b) \$125.00 \$125.00 Line from Schedule A/B: 12.1 П 100% of fair market value, up to any applicable statutory limit **Checking: Great Lakes Credit Union** 735 ILCS 5/12-1001(b) \$1.503.00 \$1,503.00 Line from Schedule A/B: 17.1 П 100% of fair market value, up to any applicable statutory limit Savings: Great Lakes Credit Union 735 ILCS 5/12-1001(b) \$640.00 \$640.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **Checking: BCU** 735 ILCS 5/12-1001(b) \$5.00 \$5.00 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit Pension: Pension through employer 735 ILCS 5/12-704 100% Unknown Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 401(k): 401(k) through employer -735 ILCS 5/12-704 100% Unknown 100% exempt Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit Thrift Saving: Thrift Savings Plan 735 ILCS 5/12-1006 Unknown 100% Line from Schedule A/B: 21.3 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Steven D Conner

Debtor 1

nation to identify your	case:		
Steven D Conner			
First Name	Middle Name	Last Name	
<b>Dorothy Conner</b>			
First Name	Middle Name	Last Name	
nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
			☐ Check if this is a amended filing
	Steven D Conner First Name  Dorothy Conner First Name	Dorothy Conner First Name Middle Name	Steven D Conner  First Name Middle Name Last Name  Dorothy Conner  First Name Middle Name Last Name

## Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

	Case 10-3/023	DOCI	Document	Page 2	4 of 61	7.54 Des	oc mani
Fill in	this information to identify y	our case:					
Debto	r 1 Steven D Con	ner					
20210	First Name	Middle	Name	Last Name			
Debto	Dorothy Conr	ner					
(Spouse	if, filing) First Name	Middle	Name	Last Name			
United	States Bankruptcy Court for the	he: NORTHE	RN DISTRICT OF ILLI	NOIS			
Case r	number n)					. –	heck if this is an
						<u> </u>	mended filing
Offic	ial Form 106E/F						
Sche	edule E/F: Creditors	s Who Hav	e Unsecured (	Claims			12/15
Schedu Schedu left. Atta name ai	cutory contracts or unexpired le le G: Executory Contracts and U le D: Creditors Who Have Claims ach the Continuation Page to this nd case number (if known).	Inexpired Leases ( s Secured by Prop s page. If you hav	Official Form 106G). Do erty. If more space is ne e no information to repo	not include eded, copy t	any creditors with partially the Part you need, fill it out,	secured claims number the ent	that are listed in tries in the boxes on the
Part 1							
	any creditors have priority unse	ecured claims aga	inst you?				
	No. Go to Part 2.						
	Yes.						
Part 2	List All of Your NONPRIC	ORITY Unsecure	ed Claims				
3. Do	any creditors have nonpriority ι	unsecured claims	against you?				
	No. You have nothing to report in	this part. Submit th	is form to the court with yo	our other sche	edules.		
	Yes.						
4. Lis	st all of your nonpriority unsecur secured claim, list the creditor sepa an one creditor holds a particular cla rt 2.	arately for each clai	m. For each claim listed, i	dentify what t	type of claim it is. Do not list c	laims already inc	luded in Part 1. If more
							Total claim
4.1	<b>Accurate Endodontics</b>		Last 4 digits of accou	unt number	9960		\$246.00
	Nonpriority Creditor's Name 1216 American Way Ste	. 104	When was the debt in	ncurred?	2016		_
	Libertyville, IL 60048  Number Street City State Zlp Co	de	As of the date you file	e, the claim i	is: Check all that apply		
	Who incurred the debt? Check	one.	•		,		
	Debtor 1 only		☐ Contingent				
	Debtor 2 only		☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only		☐ Disputed				
	☐ At least one of the debtors ar	nd another	Type of NONPRIORIT	Y unsecured	d claim:		
	☐ Check if this claim is for a		☐ Student loans				
	debt Is the claim subject to offset?	<b>,</b>	Obligations arising report as priority claims		ration agreement or divorce t	hat you did not	
	■ No				g plans, and other similar deb	ots	
	☐ Yes		Other. Specify M		5,		
			- Other. Specify				-

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 25 of 61

Debtor 1 Steven D Conner

Nonpriority Creditor's Name 11638 S. Western Ave. Chicago, IL 60643 Number Street City State 2 Dode Who incurred the debtor 2 only Debtor 2 only Debtor 2 only As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  Other: Specify Medical  When was the debt incurred?  Opened 06/11  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  Opened 06/11  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  Opened 06/11  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  Opened 06/11  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  Opened 06/11  As of the date you file, the claim is: Check all that apply  Obetor 2 only  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?	Debto	Dorothy Conner	Case number (if know)	
1638 S. Western Ave.   Chicago, IL. 60643	4.2		Last 4 digits of account number 9960	\$286.00
Number Street City State Zip Code   No incurred the debt? Check one.   Debtor 1 only   Contingent   Uniquidated   Debtor 2 only   Uniquidated   Debtor 1 and Debtor 2 only   Uniquidated   Student bans		11638 S. Western Ave.	When was the debt incurred? 2016	
Debtor 1 and Debtor 2 only		Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Debtor 1 and Debtors 2 only		☐ Debtor 1 only	☐ Contingent	
Debtor 1 and Debtor 2 only		☐ Debtor 2 only		
At least one of the debtors and another   Check if this claim is for a community debt   Student loans   Stud		■ Debtor 1 and Debtor 2 only		
Check if this claim is for a community debt is the claim subject to offset?		At least one of the debtors and another	•	
debt   st the claim subject to offset?   claim		_	☐ Student loans	
No		debt		
A.3 Capital Recovery Syste Nonpriority Creditor's Name 100 Medway Rd Ste 201 Milford, MA 01757 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 she claim subject to offset? No Collection's Name Other. Specify  Collection Attorney Beach Park Animal Hosp.  As of the date you file, the claim is: Check all that apply  When was the debt incurred? Opened 06/11  As of the date you file, the claim is: Check all that apply  When was the debt incurred? Opened 06/11  As of the date you file, the claim is: Check all that apply  Who incurred the debtors and another Debtor 1 and Debtor 2 only Debtor 1 sharing plans, and other similar debts  Collection Attorney Beach Park Animal Hosp.  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Unliquidated Unliquidated Unliquidated Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Contract Callers Inc. Cci Augusta, GA 30901 At least one of the debtors and another Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Disputed Di			<u></u>	
Nonpriority Creditor's Name 100 Medway Rd Ste 201 Milford, MA 01757 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor to effect if this claim is for a community debt Is the claim subject to offset? Nonpriority Creditor's Name Contract Callers Inc. Cci Augusta, GA 30901 Number Street City State Zip Code Who incurred the debt/s cand another Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 1 only Debtor 3 only Debtor 4 least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Student loans Uniform Revenue Reven			Other. Specify Medical	
100 Medway Rd Ste 201 Milford, MA 01757 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only List debt is claim is for a community debt Shade Steet City State Zip Code Who incurred the debtors and another Check if this claim is for a community debt Shade Steet Contract Callers Inc. Cci Augusta, GA 30901 Number Street City State Zip Code Who incurred the debtors and another Contract Callers Inc. Cci Augusta, GA 30901 Number Street City State Zip Code Who incurred the debtors and another Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 and Debtor 3 only Debtor 5 only Debtor 5 only Debtor 6918 S170  Coci Shade Steet City State Zip Code Who incurred the debt? Check one. Debtor 6918 Debtor 1 only Debtor 1 only Debtor 6918 S170 Student loans Separation agreement or divorce that you did not report as priority claims Separation agreement or divorce that you did not report as priority claims Separation agreement or divorce that you did not report as priority Creditor's Name Contract Callers Inc. Cci Augusta, GA 30901 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Disputed Type of NoNPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Disputed Student loans Student loans Debtor 1 only Disputed Student loans Debtor 1 only Debtor 1 only Disputed Student loans Debtor 1 only Debtor 1 only Disputed Student loans Debtor 2 only Disputed Student loans Debtor 3 only only only only only only only only	4.3		Last 4 digits of account number 6114	\$103.00
Number Street City State Zip Code Who incurred the debt? Check one.    Debtor 1 only		100 Medway Rd Ste 201	When was the debt incurred? Opened 06/11	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 3 priority Claims No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Beach Park Animal Hosp.  Last 4 digits of account number Contract Callers Inc. Cci Augusta, GA 30901 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 treet City State Zip Code Obligations arising out of a separation agreement or divorce that you did not report as priority claims Street City State Zip Code Obligations arising out of a separation agreement or divorce that you did not report as priority claims Student loans Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 3 only Debtor 5 can another Check if this claim is for a community debt Student loans Debtor 4 a separation agreement or divorce that you did not report as priority claims Debtor 4 on Attorney Beach Park Animal Hosp.  Collection Attorney Beach Park Animal Hosp.  Student loans Store Student loans Debtor 4 a separation agreement or divorce that you did not report as priority claims Debtor 5 contingent Debtor 5 contingent Debtor 6 contingent Debtor 7 profit-sharing plans, and other similar debts		Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt No Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Student loans Student loans Debtor 3 esparation agreement or divorce that you did not report as priority claims Pose Collection Attorney Beach Park Animal Hosp.  Last 4 digits of account number Contract Callers Inc. Cci Augusta, GA 30901 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 2 only Disputed Student loans State Student loans Student loans Collection Attorney Beach Park Animal Hosp.  State Inc. Collection Attorney Beach Park Animal Hosp.  State Collection Attorney Beach Park Animal Hosp.  State Inc. Collection Attorney Beach Park Animal Hos		■ Debtor 1 only	☐ Contingent	
Debtor 1 and Debtor 2 only		Debtor 2 only	☐ Unliquidated	
Check if this claim is for a community debt   Check if this claim is for a community debt   Student loans   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Debts to pension or profit-sharing plans, and other similar debts   Collection Attorney Beach Park Animal   Hosp.		Debtor 1 and Debtor 2 only	☐ Disputed	
debt   Sthe claim subject to offset?   Obligations arising out of a separation agreement or divorce that you did not report as priority claims     No		☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Is the claim subject to offset?  No Debts to pension or profit-sharing plans, and other similar debts  Collection Attorney Beach Park Animal Hosp.  Last 4 digits of account number 6918  Start A digits of account number 6918  Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt State Claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts  Collection Attorney Beach Park Animal Hosp.  Start A digits of account number 6918  Start A digits of account number 6918  Start A digits of account number 6918  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Unliquidated Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Student loans Check if this claim is for a community debt Student loans Debts to pension or profit-sharing plans, and other similar debts		☐ Check if this claim is for a community	☐ Student loans	
Collection Attorney Beach Park Animal Hosp.  4.4 Cci Nonpriority Creditor's Name Contract Callers Inc. Cci Augusta, GA 30901 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No  Collection Attorney Beach Park Animal Hosp.  Story  Story  Collection Attorney Beach Hosp.  Story  Story  Collection Attorney Beach Hosp.  Story  Story  Collection Hosp.  Story  Contingent Unliquidated				
Cci Nonpriority Creditor's Name Contract Callers Inc. Cci Augusta, GA 30901 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No No Debtor 2 onffset? Debtor 3 onffset? Debtor 2 onffset? Debtor 3 onffset? Debtor 4 onffset? Debtor 5 onffset? Debtor 6 onffset? Debtor 7 onffset? Debtor 8 onffset 8 onffset 9 onffset		■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Nonpriority Creditor's Name Contract Callers Inc. Cci Augusta, GA 30901  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtors and another At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  To check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  To contingent Unliquidated Unliq		Yes		
Contract Callers Inc. Cci Augusta, GA 30901  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	4.4	= =	Last 4 digits of account number 6918	\$171.00
Number Street City State ZIp Code  Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		Contract Callers Inc. Cci	When was the debt incurred?	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		■ Debtor 1 only	☐ Contingent	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ sthe claim subject to offset? □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts				
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts				
□ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		,	·	
debt  Is the claim subject to offset?  ■ No  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  □ Debts to pension or profit-sharing plans, and other similar debts			☐ Student loans	
■ No □ Debts to pension or profit-sharing plans, and other similar debts		debt		
		<u> </u>		
□ 40 Noville Ob and Obe Observation		■ No		
☐ Yes ☐ Other. Specify 10 North Shore Gas Company		Yes	■ Other. Specify _ 10 North Shore Gas Company	

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 26 of 61

Debtor Debtor	1 Steven D Conner 2 Dorothy Conner		Case number (if know)	
4.5	Certified Services Inc	Last 4 digits of account number	0343	\$270.00
	Nonpriority Creditor's Name 1733 Washington St Ste 2 Waukegan, IL 60085	When was the debt incurred?	Opened 12/10	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Anesthesic	Attorney Lake County  logists	
4.6	Choice Recovery Nonpriority Creditor's Name	Last 4 digits of account number	8800	\$54.00
	1550 Old Henderson Rd St Columbus, OH 43220	When was the debt incurred?	Opened 02/14	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify  Collection Associat	Attorney Metro Square Dental	
4.7	Comnwith Fin Nonpriority Creditor's Name	Last 4 digits of account number	43N1	\$97.00
	245 Main St Dickson City, PA 18519	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Infinity Hea	llthcare	

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 27 of 61

Debto	Dorothy Conner		Case number (if know)	
1.8	Convergent Outsourcing  Nonpriority Creditor's Name  800 Sw 39th St	Last 4 digits of account number  When was the debt incurred?	4609 Opened 12/13	\$304.00
	Renton, WA 98057  Number Street City State Zlp Code	As of the date you file, the claim i		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify Collection	Attorney Comcast	
.9	Erc Nonpriority Creditor's Name	Last 4 digits of account number	9410	\$58.00
	8014 Bayberry Rd Jacksonville, FL 32256	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify 11 Tmobile		
.1	Great Lakes Cr Un	Last 4 digits of account number	0801	Unknown
	Nonpriority Creditor's Name		Opened 05/00 Last Active	
	Building 290 Great Lakes, IL 60088	When was the debt incurred?	Opened 05/09 Last Active 5/05/11	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Recreation	al	

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 28 of 61

Debtor 1 Debtor 2	Steven D Conner Dorothy Conner		Case number (if know)	
	Hong Wang and Ming Zou	Last 4 digits of account number	9960	\$4,500.00
1	l 608 Jessica Lane Libertyville, IL 60048	When was the debt incurred?	2012	
1	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
[	Debtor 2 only	☐ Unliquidated		
I	Debtor 1 and Debtor 2 only	☐ Disputed		
[	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a sens	ration agreement or divorce that you did not	
l	s the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not	
I	No	Debts to pension or profit-sharing	g plans, and other similar debts	
[	Yes	Other. Specify Collection	Account	
- 1	Hune Realty, LLC	Last 4 digits of account number	9960	\$10,000.00
7	Nonpriority Creditor's Name 723 Saddlewood Dr. Nauconda, IL 60084	When was the debt incurred?	2015	
1	Nationida, IE 60064  Number Street City State Zlp Code  Nho incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
[	Debtor 1 only	☐ Contingent		
[	Debtor 2 only	☐ Unliquidated		
I	Debtor 1 and Debtor 2 only	☐ Disputed		
[	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
[	☐ Check if this claim is for a community	☐ Student loans		
	lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
I	No	Debts to pension or profit-sharing	g plans, and other similar debts	
[	☐ Yes	Other. Specify Collection	Account	
J	C System Inc	Last 4 digits of account number	8001	\$956.00
F	Nonpriority Creditor's Name Po Box 64378 Saint Paul, MN 55164	When was the debt incurred?	Opened 03/15	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
V	Who incurred the debt? Check one.			
I	Debtor 1 only	☐ Contingent		
[	Debtor 2 only	☐ Unliquidated		
[	Debtor 1 and Debtor 2 only	☐ Disputed		
[	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
_	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
[	☐Yes	Other. Specify Collection	Attorney At T Uverse	

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 29 of 61

Debtor Debtor	1 Steven D Conner 2 Dorothy Conner		Case number (if know)	
4.1 4	I C System Inc	Last 4 digits of account number	2001	\$956.00
	Nonpriority Creditor's Name Po Box 64378	When was the debt incurred?	Opened 12/13	
	Saint Paul, MN 55164  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney At T Uverse	
4.1 5	Infinity Healthcare Physicians	Last 4 digits of account number	9960	\$77.00
	Nonpriority Creditor's Name 5100 Peachtree Industrial Blvd. Norcross, GA 30071	When was the debt incurred?	2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.1 6	Keynote Consulting	Last 4 digits of account number	8160	\$4,357.00
	Nonpriority Creditor's Name 220 W Campus Dr Ste 102 Arlington Heights, IL 60004	When was the debt incurred?	Opened 08/12	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Union	Attorney Great Lakes Credit	

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Debtor 1 Steven D Conner Document Page 30 of 61

Debt	or 2 Dorothy Conner	Case number (if know)					
4.1 7	Keynote Consulting	Last 4 digits of account number	9157	\$509.00			
<u>/                                      </u>	Nonpriority Creditor's Name 220 W Campus Dr Ste 102	When was the debt incurred?	Opened 02/13				
	Arlington Heights, IL 60004  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	ho incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	□Yes	■ Other. Specify	Attorney Advanced Endodontics				
4.1 8	Lake County Acute Care	Last 4 digits of account number	9960	\$20.00			
	Nonpriority Creditor's Name 75 Remittance Dr. Suite 1151	When was the debt incurred?	2015				
	Chicago, IL 60675  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing					
	☐ Yes	Other. Specify Medical					
4.1 9	Mbb	Last 4 digits of account number	0971	\$490.00			
	Nonpriority Creditor's Name 1460 Renaissance Dr	When was the debt incurred?	Opened 09/13				
	Park Ridge, IL 60068  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify  Collection A Sc	Attorney Angelique Cohen Md				

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 31 of 61

Milbb	Debtor Debtor	1 Steven D Conner 2 Dorothy Conner		Case number (if know)	
Norphorety Creditor's Name   1468 Renaissance Dr   Park Ridge, IL 60068   Number Street City States of Legislate   Northern Street City States   Northern Street City States   Northern Street City States   Northern Street City States   Nor		Mbb	Last 4 digits of account number	1097	\$285.00
Number Stried City State Zip Code   Who incurred the debt? Check one.   Debtor 1 and Debtor 2 only   Unliquidated   Unliquid		1460 Renaissance Dr	-	Opened 09/13	
Debtor 2 only Debtor 3 and Debtor 4 and Debtor 3 and another Check if this claim is for a community debt    A least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?   No		Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Dubtor 1 and Debtor 2 only		Debtor 1 only			
At least one of the debtors and another   Check if this claim is for a community debt   St. the claim subject to offset?   Debts to pension or profit-sharing plans, and other similar debts   Collection Attorney Angelique Cohen Md		_ ′	<u> </u>		
Check if this claim is for a community debt is the claim subject to offset?   Student loans   Debts to pension or profit-sharing plans, and other similar debts   Collection Attorney Angelique Cohen Md		_	•	Label of	
Content of the state of the debtor 2 and y   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1		_		d claim:	
No		debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Ves			<u></u>	og plans, and other similar debts	
At least one of the debtors and another   Steder to a sporation or profits sharing plans, and other similar debts		- NO	·		
Nonpriority Creditor's Name 1460 Renaissance Dr Park Ridge, IL 60068 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 8 Nonpriority Creditor's Name Check if this claim is for a community debt Is the claim subject to offset?  Mbb Nonpriority Creditor's Name 1460 Renaissance Dr Park Ridge, IL 60068 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 priority claims Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Park Ridge Nonpriority Creditor's Name 1460 Renaissance Dr Park Ridge, IL 60068 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 nad Debtor 2 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 1 only Debtor 9 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 1 only Debtor 7 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 1 only Debtor 3 only Debtor 1 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 1 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 only		Yes		Attorney Angenque content ind	
Nonpriority Creditor's Name 1460 Renaissance Dr   Park Ridge, IL 60068   Number Street City State Zip Code   Who incurred the debt? Check one.   Debtor 1 and Debtor 2 only   Unliquidated   Disputed   Disputed   Disputed   Debtor state   Debtor	4.2	Mbb	Local A digita of account number	5867	\$135.00
Park Ridge, IL. 60068	1		Last 4 digits of account number		Ψ100.00
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset?  Who incurred the debtors and another 1460 Renaissance Dr Park Ridge, IL 60068 Number Street City State Zip Code Who incurred the debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 only Contingent Unliquidated Debtor 1 only Contingent Unliquidated Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 onlor 1 onlor 1 onlor 2 onlor 2 onlor 3 community debt Debtor 1 onlor 2 onlor 3 community debt Debtor 1 onlor 3 community debt Debtor 2 onlor 3 community debt Debtor 1 onlor 3 community debt Debtor 1 onlor 3 community debt Debtor 1 onlor 3 community debt Debtor 2 onlor 3 community debt Debtor 1 onlor 3 community debt Debtor 1 onlor 3 community debt Debtor 2 onlor 3 community debt Debtor 2 onlor 3 community debt Debtor 3 community debt Debtor 4 onlor 3 community debt Debtor 4 onlor 4 community debt Debtor 5 community debt Debtor 6 community debt Debtor 9 community debt 1 community debt Debtor 9 community debt 1 community debt 2 community debt 2 community debt 3 community debt 3 community debt 3 community debt 4 community debt 4 community debt 5 community debt 6 community debt 6 community debt 6 community debt 6 community debt 7 community debt 7 community debt 7 community debt 7 community debt 8 community debt 8 community debt 8 community debt 8 community debt 9 community debt 8 community debt 9 community debt		1460 Renaissance Dr	When was the debt incurred?	Opened 12/13	
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts  Collection Attorney Park Ridge Anesthesiology    Mbb			As of the date you file, the claim i	is: Check all that apply	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt step the claim subject to offset?  No Debtor 1 and Debtor 2 only Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Collection Attorney Park Ridge Anesthesiology     As of the date you file, the claim is: Check all that apply					
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify Anesthesiology □ Mbb □ Nonpriority Creditor's Name 1460 Renaissance Dr Park Ridge, IL 60068 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt is the claim subject to offset? □ No □ Debtor 1 onfset? □ Student loans □ Debtor 2 only □ Debtor 3 only □ Contingent □ Debtor 4 and Debtor 5 only □ Check if this claim is for a community debt is the claim subject to offset? □ No □ Debtor 1 onfset? □ Check if this claim is for a community debt is the claim subject to offset? □ No □ Debtor 1 onfset? □ Check if this claim is for a community debt is the claim subject to offset? □ Debtor 2 onfset is the claim subject to offset? □ Debts to pension or profit-sharing plans, and other similar debts □ Collection Attorney Tricounty Emrg		_	☐ Contingent		
At least one of the debtors and another   Check if this claim is for a community debt   Student loans   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Other. Specify   Collection Attorney Park Ridge   Anesthesiology   Anesthesiology   Anesthesiology   Opened 01/14		Debtor 2 only	☐ Unliquidated		
Check if this claim is for a community debt   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Other. Specify   Collection Attorney Park Ridge   Anesthesiology		☐ Debtor 1 and Debtor 2 only	•		
Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Debts to pension or profit-sharing plans, and other similar debts		☐ At least one of the debtors and another	_	d claim:	
Is the claim subject to offset?  No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Park Ridge Anesthesiology    Ves					
Debts to pension or profit-sharing plans, and other similar debts  Collection Attorney Park Ridge Anesthesiology    Ves				aration agreement or divorce that you did not	
Anesthesiology    Anesthesiology		■ No	' '	ng plans, and other similar debts	
Last 4 digits of account number   OU01   \$57.00			_ Collection	Attorney Park Ridge	
Nonpriority Creditor's Name 1460 Renaissance Dr Park Ridge, IL 60068 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  No  No  No  When was the debt incurred? Opened 01/14  As of the date you file, the claim is: Check all that apply  Vhen was the debt incurred? Opened 01/14  As of the date you file, the claim is: Check all that apply  Vhen was the debt incurred? Opened 01/14  As of the date you file, the claim is: Check all that apply  Vhen was the debt incurred? Opened 01/14  As of the date you file, the claim is: Check all that apply  Vhen was the debt incurred? Opened 01/14  As of the date you file, the claim is: Check all that apply  Vhen was the debt incurred? Opened 01/14  As of the date you file, the claim is: Check all that apply  Vhen was the debt incurred? Opened 01/14  As of the date you file, the claim is: Check all that apply  Vhen was the debt incurred? Opened 01/14  As of the date you file, the claim is: Check all that apply  Vhen was the debt incurred? Opened 01/14  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Vhen was the debt incurred?  As of the date you file, the claim is: Check all that apply		Mbb	Lord Potto Company	0001	\$57.00
Park Ridge, IL 60068  Number Street City State Zlp Code Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Disputed □ Debtor 1 and Debtor 3 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debtor 1 only □ Contingent □ Unliquidated □ Disputed □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts  Collection Attorney Tricounty Emrg	2		Last 4 digits of account number		Ψ57.00
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Tricounty Emrg		1460 Renaissance Dr Park Ridge, IL 60068	When was the debt incurred?	Opened 01/14	
■ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Collection Attorney Tricounty Emrg			As of the date you file, the claim	is: Check all that apply	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Collection Attorney Tricounty Emrg		☐ Debtor 1 only	☐ Contingent		
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Collection Attorney Tricounty Emrg		■ Debtor 2 only	☐ Unliquidated		
Check if this claim is for a community debt  Is the claim subject to offset?  No  Debts to pension or profit-sharing plans, and other similar debts  Collection Attorney Tricounty Emrg		☐ Debtor 1 and Debtor 2 only	☐ Disputed		
debt  Is the claim subject to offset?  No  □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Collection Attorney Tricounty Emrg		☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Is the claim subject to offset?  No  Debts to pension or profit-sharing plans, and other similar debts  Collection Attorney Tricounty Emrg			☐ Student loans		
■ No □ Debts to pension or profit-sharing plans, and other similar debts □ Collection Attorney Tricounty Emrg				aration agreement or divorce that you did not	
_ Collection Attorney Tricounty Emrg		_		ng plans, and other similar debts	
			Collection	Attorney Tricounty Emrg	

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 32 of 61

2 Dorothy Conner	Case number (if know)	Case number (if know)		
Merchants Credit Guide	Last 4 digits of account number 5461	\$106.00		
Nonpriority Creditor's Name 223 W Jackson Blvd Ste 4 Chicago, IL 60606	When was the debt incurred? Opened 10/11			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
☐ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims	d not		
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
Yes	■ Other. Specify Collection Attorney Lake Forest Pediatri	ics		
Nationwide	Last 4 digits of account number 6795	\$184.00		
Nonpriority Creditor's Name 5503 Cherokee Av Suite 200 Alexandria. VA 22312	When was the debt incurred?			
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
☐ Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did report as priority claims	d not		
■ No	Debts to pension or profit-sharing plans, and other similar debts			
Yes	Other. Specify Infinity Healthcare Physicia			
Oac	Last 4 digits of account number 3345	\$106.00		
Nonpriority Creditor's Name	Last 4 digits of account number			
Po Box 500	When was the debt incurred?			
Baraboo, WI 53913  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon all that apply			
☐ Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did report as priority claims	d not		
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
☐ Yes	■ Other. Specify Lake County Radiology Assoc			

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 33 of 61

Debtor 1 Stev Debtor 2 Doro	ren D Conner othy Conner		Case number (if know)	
•	& Gene Crump	Last 4 digits of account number	9960	\$20,000.00
3302 N	ity Creditor's Name  I. Lewis Ave. egan, IL 60087	When was the debt incurred?	2013	
	Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who inc	curred the debt? Check one.			
☐ Debto	or 1 only	☐ Contingent		
☐ Debto	or 2 only	☐ Unliquidated		
Debto	or 1 and Debtor 2 only	☐ Disputed		
☐ At lea	ast one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Chec	ck if this claim is for a community	☐ Student loans		
debt Is the cla	aim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No		Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes		Other. Specify Collection	Account	
4.2 Recmo	gmt Srvc	Last 4 digits of account number	5410	\$472.00
240 En	ity Creditor's Name nery Street	When was the debt incurred?		
Number	Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
■ Debto		☐ Contingent		
☐ Debto	•	☐ Unliquidated		
_	or 2 only or 1 and Debtor 2 only	☐ Disputed		
	ast one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	ck if this claim is for a community	☐ Student loans		
debt	aim subject to offset?		aration agreement or divorce that you did not	
■ No		Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes		Other. Specify 05 Waste N	lanagement Retail	
4.2 Recmo	gmt Srvc	Last 4 digits of account number	0619	\$144.00
	rity Creditor's Name			
	nery Street	When was the debt incurred?		
	chem, PA 18015 Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	curred the debt? Check one.	710 of the date you me, the stall	onesk an that apply	
■ Debto	or 1 only	☐ Contingent		
☐ Debto	·	☐ Unliquidated		
	or 1 and Debtor 2 only	☐ Disputed		
	ast one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community		☐ Student loans		
debt	aim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No		Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes		Other. Specify 05 Waste N	lanagement Retail	

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 34 of 61

btor 2 Dorothy Conner		Case number (if know)			
U S Dept Of Ed/GsI/Atl	Last 4 digits of account number	3296	\$39.00		
Nonpriority Creditor's Name Po Box 4222 Iowa City, IA 52244	When was the debt incurred?	Opened 10/11 Last Active 2/20/15			
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent				
■ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community debt	■ Student loans				
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
Yes	Other. Specify				
	Educationa	1			

### Part 3: List Others to Be Notified About a Debt That You Already Listed

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total Claim

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 39.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 44,943.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 44,982.00

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		DOGUILLE	III PAUE 33 01 0 1	
Fill in this infor	mation to identify your	case:		
Debtor 1	Steven D Conner			
	First Name	Middle Name	Last Name	
Debtor 2	<b>Dorothy Conner</b>			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is amended filing

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

I	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3	City		State	ZIF Code	
2.0	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<del>_</del>
2.5	Oity		Oldio	Zii Oodo	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

		Docume	ent Page 36 d	ot 61	
Fill in this	information to identify your	case:			
Debtor 1	Stoven D Conner				
Debioi i	Steven D Conner First Name	Middle Name	Last Name		
Debtor 2	<b>Dorothy Conner</b>				
(Spouse if, filir		Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
O	h				
Case numl	per				☐ Check if this is an
,					amended filing
Sched Codebtors people are fill it out, a	I Form 106H  Iule H: Your Cod  are people or entities who a filing together, both are equ nd number the entries in the	re also liable for any deb ally responsible for supp boxes on the left. Attach	olying correct informat n the Additional Page t	tion. If more space is neede	d, copy the Additional Page,
	and case number (if known)			. aa a aadahtar	
1. 00	you have any codebtors? (If	you are filing a joint case,	ao not iist either spouse	as a codeptor.	
■ No □ Yes	3				
Arizon  No.	hin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3.  S. Did your spouse, former spouse.	Nevada, New Mexico, Pu	erto Rico, Texas, Wash		es <i>and territorie</i> s include
in line Form	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed the cre	n you. List the person shown editor on Schedule D (Official dule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The creditor Check all schedules tha	to whom you owe the debt t apply:
2.4				O Cabadula D lina	
3.1	Name			☐ Schedule D, line	
				☐ Schedule E/F, line ☐ Schedule G, line _	<del></del>
_					
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
_					
	Number Street City	State	ZIP Code		

#### Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Page 37 of 61 Document

Fill	in this information to identify your c	ase:		•		
Del	otor 1 Steven D Co	onner				
	otor 2 Dorothy Co	nner				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS			
	se number nown)		-			
<u>O</u>	fficial Form 106I			MM / DD/ Y	<del>YYY</del>	
S	chedule I: Your Inc	ome			12/15	
atta	use. If you are separated and you ch a separate sheet to this form.  The describe Employment information.			d case number (if		
	If you have more than one job,		■ Employed	■ Empl	<u> </u>	
	attach a separate page with information about additional	n a separate page with mation about additional Employment status		_ `	☐ Not employed	
	employers.	Occupation	Carpenter	Teleco	m Operator	
	Include part-time, seasonal, or self-employed work.	Employer's name	<b>Great Lakes Naval Base</b>	Advoca	ate Condell	
	Occupation may include student or homemaker, if it applies.	Employer's address	530 Farragut Ave Great Lakes, IL 60088		filwaukee nda, IL 60084	
		How long employed t	here? 6 years		0 years	
Pai	t 2: Give Details About Mo	nthly Income				
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to report for any	line, write \$0 in the	space. Include your non-filing	
•	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information for all emp	loyers for that perso	on on the lines below. If you need	
				For Debtor 1	For Debtor 2 or	

**List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

		non-t	iling spouse
2. \$	4,383.00	\$	2,017.00
3. +\$	0.00	+\$_	0.00
4. \$	4,383.00	\$_	2,017.00

Official Form 106I Schedule I: Your Income page 1

# Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 38 of 61

	tor 1 tor 2	Steven D Conner Dorothy Conner	_		Cas	e number (if known)	_			
					Fo	or Debtor 1		For Debtor		
	Cop	y line 4 here	4.		\$	4,383.00			,017.00	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	а.	\$	526.00		\$	121.00	
	5b.	Mandatory contributions for retirement plans	5b	٥.	\$	188.00		\$	0.00	_
	5c.	Voluntary contributions for retirement plans	50	Э.	\$	126.00		\$	110.00	_
	5d.	Required repayments of retirement fund loans	50		\$_	0.00		\$	0.00	_
	5e.	Insurance	5e		\$_	0.00			766.00	_
	5f.	Domestic support obligations	5f		\$_	0.00		\$	0.00	_
	5g. 5h.	Union dues Other deductions. Specify:	5g	ያ. ነ.+	\$ \$	0.00	_	\$	0.00	_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— <sup>31</sup> 6.		Ψ_ \$		_	· <del></del>	0.00 997.00	-
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		Ψ_ \$	840.00				-
			7.		Φ_	3,543.00		Φ 1	,020.00	_
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
	O.L.	monthly net income.	88		\$_	0.00		\$	0.00	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			\$_	0.00		\$	0.00	_
	04	settlement, and property settlement.  Unemployment compensation	8c 8c		\$ _	0.00		\$ \$	0.00	_
	8d. 8e.	Social Security	86		φ_ \$	0.00		\$	0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f		\$_	0.00		\$	0.00	_
	8g.	Pension or retirement income	80		\$_	0.00		\$	0.00	_
	8h.	Other monthly income. Specify:	8r	1.+	\$_	0.00	+	\$	0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	0.00		\$	0.0	0
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		3,543.00 + \$		1,020.00	= \$	4,563.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ-		3,343.00		1,020.00		4,000.00
11.	Inclionation of the other of th	te all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depe					d in Schedule	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certalies							\$	4,563.00
13.	Do :	you expect an increase or decrease within the year after you file this form No.	1?						Combi	ned y income
	П	Yes. Explain:								

## Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 39 of 61

Sill	in this informa	ation to identify yo	our case.						
	otor 1					Ch	eck if t	hio io:	
Deb	OLOT I	Steven D Co	nner					mended filing	
Deb	otor 2	<b>Dorothy Con</b>	iner				A su	pplement shov	ving postpetition chapter
(Sp	ouse, if filing)						13 e	xpenses as of	the following date:
Unit	ed States Bank	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM .	/ DD / YYYY	
1	e number								
(If k	nown)								
0	fficial Fo	rm 106J							
S	chedule	J: Your l	 Exper	ises					12/1
Be info nur	as complete ormation. If m mber (if know	and accurate as nore space is ne n). Answer ever	possible. eded, atta ry question	If two married people ar ch another sheet to this					
Par 1.	t 1: Desci	ribe Your House nt case?	hold						
	□ No. Go to								
	Yes. Doe	es Debtor 2 live i	in a separ	ate household?					
	■ N □ Y	-	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of De	ebtor 2.		
2.	Do you hay	e dependents?	□ No	•	,				
۷.	Do not list D	•	■ Yes.	Fill out this information for each dependent	Dependent's relati			Dependent's ige	Does dependent live with you?
	Debtor 2.			each dependent	Debtor 1 or Debtor	-	_ •	ige	
	Do not state dependents				Dependent		7	7	□ No ■ Yes
	асрепастьз	names.			Dopondon				■ res □ No
					Dependent		ç	)	■ Yes
									□ No
					Dependent			13	Yes
					Dependent		1	17	□ No ■ Yes
3.	expenses of	penses include of people other to d your depende	han $_{oldsymbol{\sqcap}}$	No Yes					55
exp	imate your ex	a date after the b	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp					
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> \				Your expe	enses
4.		or home owners		ses for your residence. I r lot.	nclude first mortgage	e 4.	\$		1,450.00
	If not include	ded in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
		erty, homeowner's	s, or renter	's insurance		4b.			0.00
			•	ipkeep expenses		4c.			0.00
	4d Home	nwner's associat	ion or cond	aominium dube		4d	2		0.00

Additional mortgage payments for your residence, such as home equity loans

5. \$

0.00

## Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 40 of 61

	teven D Conner		
ebtor 2 De	orothy Conner	Case number (if known)	
. Utilities:	•		
	ectricity, heat, natural gas	6a. \$	267.00
	ater, sewer, garbage collection	6b. \$	88.00
	elephone, cell phone, Internet, satellite, and cable services	6c. \$	254.00
6d. Ot	ther. Specify:	6d. \$	0.00
	nd housekeeping supplies	7. \$	1,000.00
	re and children's education costs	8. \$	0.00
Clothing	g, laundry, and dry cleaning	9. \$	300.00
. Persona	al care products and services	10. \$	125.00
. Medical	and dental expenses	11. \$	225.00
. Transpo	ortation. Include gas, maintenance, bus or train fare.	· -	
	nclude car payments.	12. \$	750.00
B. Entertai	nment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
. Charitab	ole contributions and religious donations	14. \$	0.00
i. Insuran			
	nclude insurance deducted from your pay or included in lines 4 or 20.	45- 0	
	fe insurance	15a. \$	0.00
	ealth insurance	15b. \$	0.00
	ehicle insurance	15c. \$	21.00
	ther insurance. Specify:	15d. \$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20	). 16. \$	0.00
Specify:	ent or lease payments:	16. Ф	0.00
	ar payments for Vehicle 1	17a. \$	0.00
	ar payments for Vehicle 2	17b. \$	0.00
	ther. Specify:	17c. \$	0.00
	ther. Specify:	17d. \$	0.00
	yments of alimony, maintenance, and support that you did not rep		0.00
	of from your pay on line 5, Schedule I, Your Income (Official Form		0.00
	ayments you make to support others who do not live with you.	\$	0.00
Specify:		19.	
. Other re	eal property expenses not included in lines 4 or 5 of this form or or	Schedule I: Your Income.	
	ortgages on other property	20a. \$	0.00
20b. Re	eal estate taxes	20b. \$	0.00
20c. Pr	operty, homeowner's, or renter's insurance	20c. \$	0.00
20d. Ma	aintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Ho	omeowner's association or condominium dues	20e. \$	0.00
. Other: S	Specify:	21. +\$	0.00
Calculat	te your monthly expenses		
	d lines 4 through 21.	\$	4,580.00
	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 10		7,300.00
			4.500.00
22C. Add	l line 22a and 22b. The result is your monthly expenses.	\$	4,580.00
3. Calculat	te your monthly net income.		
	opy line 12 (your combined monthly income) from Schedule I.	23a. \$	4,563.00
23b. Co	opy your monthly expenses from line 22c above.	23b\$	4,580.00
	•		,
	ubtract your monthly expenses from your monthly income.	00 -	47.00
Th	ne result is your monthly net income.	23c. \$	-17.00
4 Da	and the first of the control of the	francisco fila Abia farres	
	expect an increase or decrease in your expenses within the year a ple, do you expect to finish paying for your car loan within the year or do you exp		se or decrease because o
	on to the terms of your mortgage?	cor your mongage payment to inclea	oc or decrease because 0
■ No.			
☐ Yes.	Explain here:		

## Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 41 of 61

ill in this infor	mation to identify your	case:			
ebtor 1					
ebioi i	Steven D Conner	Middle Name	Last Name		
ebtor 2	Dorothy Conner				
oouse if, filing)	First Name	Middle Name	Last Name		
nited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
ase number					
known)				☐ Check if to amended	
u must file thi taining money	is form whenever you f	ile bankruptcy schedules n connection with a bank		t information. aking a false statement, concealing p ines up to \$250,000, or imprisonment	
Sign	n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out ban	kruptcy forms?	
■ No					
☐ Yes. N	Name of person			Attach Bankruptcy Petition Prep Declaration, and Signature (Office	
	alty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed w	vith this declaration and	
	ven D Conner		X /s/ Dorothy C	onner	
	n D Conner		Dorothy Con	ner	
Signatu	re of Debtor 1		Signature of De	btor 2	
Date I	November 30, 2016		Date <b>Novem</b>	shor 30, 2016	

## Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 42 of 61

Fill ir	this inform	ation to identify you	case:			
Debto	or 1	Steven D Conne	r			
	_	First Name	Middle Name	Last Name		
Debto (Spous	or 2 e if, filing)	Dorothy Conner First Name	Middle Name	Last Name		
		kruptov Court for the	NORTHERN DISTRICT	OE II I INOIS		
Unite	u States ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case (if know	number				_	Check if this is an amended filing
Sta		of Financial		duals Filing for I		4/16
nforn numb	nation. If mo er (if known	ore space is needed, ). Answer every ques	attach a separate sheet to stion.	this form. On the top of a	e equally responsible for sup ny additional pages, write yo	
Part			rital Status and Where You	u Lived Before		
1. V	Vhat is your	current marital statu	s?			
<b>I</b>	■ Married □ Not marr	ied				
2. C	Ouring the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	all of the places you li	ived in the last 3 years. Do n	ot include where you live no	w.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
					nity property state or territor Rico, Texas, Washington and V	
I	No					
	☐ Yes. Mal	ke sure you fill out Sch	nedule H: Your Codebtors (C	Official Form 106H).		
Part :	2 Explain	the Sources of You	r Income			
r urt	Explair	Time doubtes of Tou	- moonic			
F	ill in the total	amount of income you	u received from all jobs and	ng a business during this y all businesses, including par νe together, list it only once ι		endar years?
	٦.,					
	J No					
[	_ 140	in the details.				
•	_ 140	in the details.	Debtor 1		Debtor 2	
•	_ 140	in the details.	Debtor 1 Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Debtor 2 Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From	Yes. Fill	in the details.  of current year until I for bankruptcy:	Sources of income	(before deductions and	Sources of income	(before deductions

Official Form 107

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Debtor 1 Steven D Conner Document Page 43 of 61

Debtor 2 <b>Dorothy Conner</b>					Case number (if known)					
			_			211				
			So	ebtor 1 burces of income neck all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)		
	For last calendar year: (January 1 to December 31, 2015 )		2015 1	■ Wages, commissions, bonuses, tips \$7,319.00		☐ Wages, common bonuses, tips	nissions,	\$0.00		
				Operating a business		☐ Operating a b	usiness			
		ndar year before December 31,	2014\ _	Wages, commissions, nuses, tips	\$15,420.00	☐ Wages, common bonuses, tips	nissions,	\$0.00		
				Operating a business		☐ Operating a b	usiness			
	■ No	source and the	s. <b>De</b>	btor 1	tely. Do not include income	Debtor 2				
			So	btor 1 urces of income scribe below.	Gross income from each source (before deductions and	Debtor 2 Sources of inco Describe below.	me	Gross income (before deductions and exclusions)		
					exclusions)			,		
Par	t 3: Lis	t Certain Paym	ents You Mad	de Before You Filed for	Bankruptcy					
<b>5.</b>	Are eithe ☐ No.	Neither Debte individual prim  During the 90  No. G  Yes Li	or 1 nor Debte narily for a personal days before you to line 7. st below each aid that credite of include pays	sonal, family, or househo ou filed for bankruptcy, di creditor to whom you pai or. Do not include paymer ments to an attorney for th	Immer debts. Consumer debtld purpose."  d you pay any creditor a totated a total of \$6,425* or more ats for domestic support oblinities bankruptcy case.	al of \$6,425* or more in one or more payr gations, such as chil	e? nents and th	ne total amount you nd alimony. Also, do		
	■ Yes	•	•	th have primarily consu	s after that for cases filed or	or after the date of	aujusimeni.	•		
	_ 100.				d you pay any creditor a tota	al of \$600 or more?				
			o to line 7.							
		in	clude paymen	, ,	d a total of \$600 or more an bligations, such as child sup	,	•			
	Creditor	's Name and A	ddress	Dates of payme	ent Total amount	Amount you still owe	Was this p	payment for		
					palu	Sull OWE				

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 44 of 61 Steven D Conner

Debto	Dorothy Conner			Cas	e number (if know	vn)	
<i>Ir</i> of a	Vithin 1 year before you filed a siders include your relatives; if which you are an officer, dire business you operate as a so limony.	any general partner ector, person in conf	rs; relatives of any gen- trol, or owner of 20% o	eral partners; partner r more of their voting	erships of which g securities; and	you are a general any managing a	al partner; corporation gent, including one fo
	■ No □ Yes. List all payments to a	an insider.					
I	Insider's Name and Address	Da	ates of payment	Total amount paid	Amount you still owe		this payment
ir	Vithin 1 year before you filed nsider? Include payments on debts gua			•	any property on	account of a do	ebt that benefited an
	No						
	Yes. List all payments to a	an insider					
ı	Insider's Name and Address	Da	ates of payment	Total amount paid	Amount you still owe		this payment itor's name
Part 4	4: Identify Legal Actions,	Repossessions, a	nd Foreclosures				
Li	Vithin 1 year before you filed ist all such matters, including nodifications, and contract dis	personal injury case	, ,	•	,	•	•
	■ No ■ Yes. Fill in the details.						
	Case title Case number	Na	ature of the case	Court or agency		Status of th	e case
	Vithin 1 year before you filed Check all that apply and fill in t		vas any of your prope	rty repossessed, f	oreclosed, garı	nished, attached	I, seized, or levied?
	No. Go to line 11. Yes. Fill in the information	holow					
_	Creditor Name and Address		escribe the Property		Da	to	Value of the
	orealtor Name and Address		plain what happened	I	Da		property
	Vithin 90 days before you fil ccounts or refuse to make a  No  Yes. Fill in the details.			uding a bank or fir	nancial instituti	on, set off any a	mounts from your
(	Creditor Name and Address	De	escribe the action the	creditor took	Da <sup>a</sup> tak	te action was	Amount
	Vithin 1 year before you filed ourt-appointed receiver, a c			erty in the possess			efit of creditors, a
	■ No □ Yes						
Part 5	5: List Certain Gifts and C	Contributions					
	Vithin 2 years before you file  No  No		did you give any gifts	s with a total value	of more than \$	600 per person'	?
	J Yes. Fill in the details for a Gifts with a total value of maper person	J	Describe the gifts			tes you gave gifts	Value
	Person to Whom You Gave	the Gift and					

Debtor 1

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 45 of 61

Debtor 1 Debtor 2 Dorothy Conner Case number (# known)

14.	4. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  No						
	☐ Yes. Fill in the details for each gift or of Gifts or contributions to charities that it more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed		Dates you contributed	Value	
Par	t 6: List Certain Losses						
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did y	you lose anytl	ning because of thef	t, fire, other disaster,	
	■ No □ Yes. Fill in the details.						
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the least the amount that insurance has paid. In the claims on line 33 of Schedule A/B:	_ist pending	Date of your loss	Value of property lost	
Par	t 7: List Certain Payments or Transfers			7			
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition p	ptcy, di preparir	ng a bankruptcy petition?	. ,	,	rty to anyone you	
	Yes. Fill in the details.				_		
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred		Date payment or transfer was made	Amount of payment	
	Bizar & Doyle, LLC 123 West Madison Street Suite 205 Chicago, IL 60602 joe@bizardoylelaw.com		Attorney Fees		2016	\$850.00	
17.	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that	ditors o	r to make payments to your creditor		r transfer any prope	rty to anyone who	
	Yes. Fill in the details.						
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bankr transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have all No  Yes. Fill in the details.	ı <b>r busin</b> s made a	ess or financial affairs? as security (such as the granting of a s				
	Person Who Received Transfer Address		Description and value of property transferred		iny property or received or debts change	Date transfer was made	
	Person's relationship to you						

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 46 of 61

Debtor 1 Steven D Conner Debtor 2 Dorothy Conner

Case number (if known)

	Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-prote No ☐ Yes. Fill in the details.		y property to a	self-settle	d trust or similar device	of which you are a			
	Name of trust	Description and va	alue of the pro	perty trans	ferred	Date Transfer was made			
Par	8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and St	orage Unit	s				
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associa  No  Yes. Fill in the details.	other financial accoun	its; certificates	of deposi					
		Last 4 digits of account number	Type of according trument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		Describe	the contents	Do you still have it?			
22.	Have you stored property in a storage unit or	place other than your	home within 1	year befor	e you filed for bankrupto	cy?			
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?			
Par	9: Identify Property You Hold or Control fo	or Someone Else							
	Do you hold or control any property that some for someone.	eone else owns? Inclu	ide any proper	ty you bori	rowed from, are storing f	or, or hold in trust			
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		Describe	the property	Value			
Par	10: Give Details About Environmental Inform	mation							
For t	he purpose of Part 10, the following definition	ns apply:							
	Environmental law means any federal, state, on toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	water, ground						
	Site means any location, facility, or property a to own, operate, or utilize it, including dispos	-	nvironmental I	law, wheth	er you now own, operate	e, or utilize it or used			
Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.									

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 47 of 61

Debtor 1 Steven D Conner Debtor 2 Dorothy Conner

Case number (if known)

24.	I. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of	any release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or adr	ministrative proceeding under any en	vironmental law? Include settlements ar	nd orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	11: Give Details About Your Business or	Connections to Any Business							
27.	Within 4 years before you filed for bankrup	tcy, did you own a business or have a	any of the following connections to any	business?					
	■ A sole proprietor or self-employed i	n a trade, profession, or other activit	y, either full-time or part-time						
	☐ A member of a limited liability comp	pany (LLC) or limited liability partners	ship (LLP)						
	☐ A partner in a partnership								
	☐ An officer, director, or managing ex	ecutive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation								
	■ No. None of the above applies. Go to I	Part 12.							
	Yes. Check all that apply above and fil	I in the details below for each busine	ss.						
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security n	umbor or ITIN					
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		umber of frie.					
	CCR Construction	Construction	EIN: 9960						
	508 Richard Brown Round Lake, IL 60073	H&R Block	From-To 2010-2016						
	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statemen	t to anyone about your business? Includ	de all financial					
	■ No								
	Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued							
	(								

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 48 of 61 Steven D Conner Debtor 1 Debtor 2 **Dorothy Conner** Case number (if known) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Steven D Conner /s/ Dorothy Conner Steven D Conner **Dorothy Conner** Signature of Debtor 1 Signature of Debtor 2 Date November 30, 2016 November 30, 2016

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No □ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

### Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 49 of 61

Fill in this infor	mation to identify your	case:		
Debtor 1	Steven D Conner			
	First Name	Middle Name	Last Name	
Debtor 2	<b>Dorothy Conner</b>			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				D. Obsert White is an
(II KIIOWII)				☐ Check if this is an amended filing

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Information below. Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	_
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	<b>—</b> •
Description of	Retain the property and enter into a  Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

## Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 50 of 61

Debtor 1 Debtor 2	Steven D Conner Dorothy Conner	Case number (if known)	
name:		☐ Retain the property and redeem it.	☐ Yes
Descrip	ation of	☐ Retain the property and enter into a	
property		Reaffirmation Agreement.  Retain the property and [explain]:	
securin		— Retain the property and [explain].	-
For any ur	List Your Unexpired Personal Property Lenexpired personal property lease that you	listed in Schedule G: Executory Contracts and Unexpired	Leases (Official Form 106G), fill
		es. Unexpired leases are leases that are still in effect; the ase if the trustee does not assume it. 11 U.S.C. § 365(p)(2	
Describe	your unexpired personal property leases		Will the lease be assumed?
Lessor's n	name:		□ No
	n of leased		
Property:			☐ Yes
Lessor's n	name:		□ No
Descriptio Property:	on of leased		
r roperty.			☐ Yes
Lessor's n			□ No
Descriptio Property:	n of leased		☐ Yes
			Li res
Lessor's n			□ No
Property:	n of leased		☐ Yes
Lessor's n			□ No
Descriptio Property:	n of leased		☐ Yes
			□ res
Lessor's n	name: on of leased		□ No
Property:	iii oi leaseu		☐ Yes
Lessor's n			□ No
Property:	on of leased		☐ Yes
Part 3:	Sign Below		
Under pen		ted my intention about any property of my estate that sec	ures a debt and any personal
	Steven D Conner	χ /s/ Dorothy Conner	
	ven D Conner	Dorothy Conner	
Signa	ature of Debtor 1	Signature of Debtor 2	
Date	November 30, 2016	Date <b>November 30, 2016</b>	

Official Form 108

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 55 of 61

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In r	Steven D Conner		Case No.		
111 1	Dorothy Conner	Debtor(s)	Chapter	7	
		Dector(c)	Chapter		
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR DE	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of the debtor (s).	ng of the petition in bankruptcy,	or agreed to be paid	to me, for services r	
	For legal services, I have agreed to accept		\$	850.00	
	Prior to the filing of this statement I have received			850.00	
	Balance Due			0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person t	inless they are mem	bers and associates of	of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the national control of the same copy of the agreement.				law firm. A
5.	In return for the above-disclosed fee, I have agreed to re-	ender legal service for all aspects	of the bankruptcy c	ease, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and rende</li> <li>b. Preparation and filing of any petition, schedules, state</li> <li>c. Representation of the debtor at the meeting of credited</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and application</li> <li>522(f)(2)(A) for avoidance of liens on ho</li> </ul>	tement of affairs and plan which ors and confirmation hearing, and reduce to market value; exe ons as needed; preparation	may be required; d any adjourned hea mption planning;	rings thereof;	filing of
6.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any disproceeding.	e does not include the following schargeability actions, judic	service: ial lien avoidanc	es or any other a	dversary
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of an bankruptcy proceeding.	y agreement or arrangement for	payment to me for r	epresentation of the	debtor(s) in
<u> </u>	November 30, 2016	/s/ Joseph R. Doy			
i	Date	Joseph R. Doyle 6 Signature of Attorney			
		Bizar & Doyle, LL			
		123 West Madisor			
		Suite 205 Chicago, IL 60602			
		312-427-3100 Fax			
		joe@bizardoylelav			
		Name of law firm			

Case <b>BîZAR</b> 5& <b>DOYI</b>	Fred 1.1/20/16BANKR 1/11/29/	6140004 DecoMain
1st Mortgage /Arrears 2nd Mortgage /Arrears Automobile #1 Automobile #2 PMSI Non-PMSI Other TOTAL \$	TOTAL S	Taxes Student Loans Child Support NSF Parking Tickets Govt. Debt Other TOTAL \$
Cosigned debt (Y/N) Wage assignment (Y/N)	Bank Account Setoff (Y/N) License suspended (Y/N)	Garnishment (Y/N) IRS Determination (Y/N)
722 Redemption (Y/N)	Motion to avoid lien (Y/N)	Judgment lien motion (Y/N)
CHAPTER 7 - eliminatés dischargea CHAPTER 7 A L'EORNEY'S FEE RETAINER FEE S // D BALANCE "FILING PEE" MONEY ORDER THE CHAPTER TWILL NOT BE THE		PROTEIN PLANTS HOWER LINE
CHAPTER 13 - debt consolidation p		
ESTIMATED Chapter 13 payment dan in	the Chapter 13 Trustee:  its, naving an estimated % to:  S (Blic  Your balance is \$  before payable 10 the BIJAR &  will be paid to us through you. Chapte  Sent reality were is billed at \$175.00.000 how. The	BORCE, 11.C)  of L3 Plan payments to the Trustee.  There 1.1 payment shows it not an extend based of Sec.
some non-dischargeable debte could survive the Charter I	3 Backropicy	cases or changes in state or lecteral law. Please he sware.
to fully disclose all financial information to BIZAR & DOYL that it is a Federal crime to omit a creditor or other information the last payment date. Attorney's advice to client is based on related to changes in the law that affect client's ability to qual any client delay should the law change. Pay in full immediate give client. 3) STATE LAW PROCEEDINGS- Client must matters and will not represent any bankruptcy client in ANY show cause or any other civil or criminal fawsuits. Client is chooses to terminate BIZAR & DOYLE, LLC's services and cancellation. BIZAR & DOYLE, LLC's services and cancellation. BIZAR & DOYLE, LLC's hourly rate is 27 DOYLE, TLC as slient's attorneys. After receiving written mearned attorneys fees paid to date. 5) COLLECTIONS-If Client is liable for all attorney's fees and costs incurred to col written request, certified mail, return receipt requested, COUNSELING FIDANCIAL MANAGEMENT. Exery ciprior to filing a bankruptcy Each client must take a financi classes at: USE TOWN ACCESSIN ORG. Attorney consisted. There is no charge to amond for a change of address is filed. Client agrees to call BIZAR & DOYLE, LLC three BIZAR & DOYLE, LLC still has to appear at the hearing endischarge. BIZAR & DOYLE, LLC's fee for negotiating a discharge issue is \$275 per hour, ten hours to be paid in advictiont delays in paying the fees, returning the petition or in prodocuments of information. Avoiding Liens/ Redemptions-C	E, I.L.C. Client must disclose all assets and all debts regard on from a bankruptcy petition. 2) TIMELY PAYMENT current applicable Local, State and Federal laws. Client a fify for bankruptcy relief or to discharge debts within a bankely so BIZAR & DOYLE, LLC can file client's case or rists personally appear at any and all state court proceedings state law matter, including, but not limited to, divorce process advised to attend all state court proceedings, unless special representation at any time; client is only entitled to a refusion proceeding of the property of the provided to a tended to a refusion proceeding. LLC will take approximately BIZAR & DOYLE, LLC is unable to collect its fees pursuant lect the debt, including court costs. 6) RESCISSIONS- to BIZAR & DOYLE, LLC no less than 15 day litent must receive credit counseling from an "approved no all management course within 45 days of the 1st date set it offee BD15131. 8) ADDITIONAL FEES- In addition to a client's petition once the case is filed to add additional set weeks after client's case has been filed to obtain the §341 wen if client does not and will charge \$200 additional fee settlement is approximately \$350 to be paid in advance wance. Delays- BIZAR & DOYLE, LLC reserves the right providing information to BIZAR & DOYLE, LLC, includitional grees that the above quoted fee does not include the money security interests (\$375), or redemptions. Client understands and agrees that if client does not pay that there is a limited time to bring such motions. Motion to akruptcy case for any reason once the case is discharged. I cored by client's bank for any reason. 9) GROUP PRACT in the basis of work and responsibility. Client authorizes of the process of the pass of work and responsibility. Client authorizes on the case is discharged.	VLAW CHANGES - Client agrees to pay fees in full prior to grees to hold BIZAR & DOYLE, LLC harmless for damages cruptcy case. BIZAR & DOYLE, LLC are not responsible for k that court rulings and law changes could alter the advice we BIZAR & DOYLE, LLC does not represent client in these sedings, contempt hearings, citation to discover assets, rules to fically advised otherwise in writing. 4) REFUNDS-1f client mid of unearned fees. Client must submit a written request of int is entitled to in the event that client discharges BIZAR & 45 days to do an accounting and issue a refund check of any uant to this contract, we will refer your account to collections. Lient may only rescind a reaffirmation agreement by sending a respirate to the bar date for rescissions. 7) CREDIT inprofit budget and credit counseling agency" within 180 days for your Section 341 meeting of creditors hearing. Take the all court costs and filing fees, client agrees to pay additional creditors and/or to list additional assets that were previously da §341 meeting approximately four weeks after client's case meeting date if client has not received notice of the meeting, for each missed court date/hearing. Adversary objections to of settlement. BIZAR & DOYLE, LLC's fee for litigating at to charge a minimum of \$150 for additional fees due to any ng appraisals, proof of insurance, titles or any other requested following additional fees for services to avoid judgment liens on vehicles (\$600)  These additional fees are to be the fee, BIZAR & DOYLE, LLC will not bring the motion and reopen a closed bankruptcy case. Client agrees to pay \$375 Bounced checks-Client agrees to pay a \$30 bounced check fee and or independent attorneys, at BIZAR & DOYLE, LLC's at its discretion to have attorneys.
Signature X \ \WWII W.	DATE Y	DATE

Nov. 17. 2016 1:52PM Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 57 of 61

B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Northern District of Illinois

Steven D				Case No.		
			Debtor(s)	Chapter	7	
	DISCL	OSTIRE OF COMP	ENSATION OF ATTO	DRNEY FOR DE	ERTOR(S)	
compensation p	oaid to me	within one year before the fi	16(b), I certify that I am the atte iling of the petition in bankrupton on of or in connection with the b	y, or agreed to be paid	to me, for services rende	red or to
For legal s	ervices, I	have agreed to accept	>>>>>>	<b>\$</b>	850.00	
Prior to th	e filing of	this statement I have receive	d	<b>\$</b>	850.00	
Balance D	uc	········		<b>\$</b>	0.00	
The source of t	he comper	nsation paid to me was:				
■ Debto	r 🗆	Other (specify):				
The source of o	compensat	tion to be paid to me is:				
■ Debto	or 🏻	Other (specify):		•		
■ I have not	agreed to :	share the above-disclosed co	mpensation with any other pers	on unless they are mem	bers and associates of my	y law firi
In return for the a. Analysis of b. Preparation c. Representa d. [Other provinces   Neger   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1986   1	the above-d f the debto and filing tion of the visions as a otlations firmation (2)(A) fo	lisclosed fee, I have agreed to or's financial situation, and re- g of any petition, schedules, so debtor at the meeting of cre- needed] with secured creditors to agreements and applica or avoldance of liens on	names of the people sharing in a render legal service for all aspundering advice to the debtor in a statement of affairs and plan who ditors and confirmation hearing to reduce to market value; at lons as needed; preparations as needed; preparatio	ects of the bankruptcy determining whether to ich may be required; , and any adjourned her exemption planning on and filing of mot	case, including: file a petition in bankrup arings thereof; ; preparation and fillr	ng of
Rep	resentations,	on of the debtors in any	dischargeability actions, ju	udicial lien avoidand	ces or any other adve	ersary
•			CERTIFICATION			nou(a) fr
I certify that the this bankruptcy pro		ng is a complete statement of	f any agreement or arrangement	for payment to me for	representation of the debi	ior(s) in
November 10						
Date	, 2010		Joseph R. Doy			
			Signature of Atto Bizar & Doyle,	ornes M.C.		
			123 West Mad	Ison Street		
			Suite 205	100		
			Chicago, IL 60 312-427-3100	Fax: 312-427-5400		
			joe@blzardoy	lelaw.com		
			Name of law firm	n		

Case 16-37825 Doc 1 Filed 11/30/16 Entered 11/30/16 14:00:34 Desc Main Document Page 58 of 61

### **United States Bankruptcy Court** Northern District of Illinois

In re	Steven D Conner Dorothy Conner		Case No.	
		Debtor(s)	Chapter 7	
	V	ERIFICATION OF CREDITOR M	<b>IATRIX</b>	
		Number of	Creditors:	23
	(our) knowledge.	•		·
Date:	November 30, 2016	/s/ Steven D Conner		
		Steven D Conner Signature of Debtor		
Date:	November 30, 2016	/s/ Dorothy Conner  Dorothy Conner		
		Signature of Debtor		

Accurate Endodontics 1216 American Way Ste. 104 Libertyville, IL 60048

Advocate Healtchare 11638 S. Western Ave. Chicago, IL 60643

Capital Recovery Syste 100 Medway Rd Ste 201 Milford, MA 01757

Cci Contract Callers Inc. Cci Augusta, GA 30901

Certified Services Inc 1733 Washington St Ste 2 Waukegan, IL 60085

Choice Recovery 1550 Old Henderson Rd St Columbus, OH 43220

Comnwlth Fin 245 Main St Dickson City, PA 18519

Convergent Outsourcing 800 Sw 39th St Renton, WA 98057

Erc 8014 Bayberry Rd Jacksonville, FL 32256

Great Lakes Cr Un Building 290 Great Lakes, IL 60088

Hong Wang and Ming Zou 1608 Jessica Lane Libertyville, IL 60048 Hune Realty, LLC 723 Saddlewood Dr. Wauconda, IL 60084

I C System Inc Po Box 64378 Saint Paul, MN 55164

Infinity Healthcare Physicians 5100 Peachtree Industrial Blvd. Norcross, GA 30071

Keynote Consulting 220 W Campus Dr Ste 102 Arlington Heights, IL 60004

Lake County Acute Care 75 Remittance Dr. Suite 1151 Chicago, IL 60675

Mbb 1460 Renaissance Dr Park Ridge, IL 60068

Merchants Credit Guide 223 W Jackson Blvd Ste 4 Chicago, IL 60606

Nationwide 5503 Cherokee Av Suite 200 Alexandria, VA 22312

Oac Po Box 500 Baraboo, WI 53913

Ozzie & Gene Crump 3302 N. Lewis Ave. Waukegan, IL 60087

Recmgmt Srvc 240 Emery Street Bethlehem, PA 18015 U S Dept Of Ed/Gsl/Atl Po Box 4222 Iowa City, IA 52244